

**MAINTENANCE PERMIT SECTION**  
**CLASS "C" APPROVAL REQUEST FORM FOR MOBILE HOMES**  
**PHONE (602) 712-8176 or 8280**  
**FAX (602) 712-3380**

DATE \_\_\_\_\_ TIME \_\_\_\_\_ APPROVAL SENT \_\_\_\_\_

COMPANY NAME \_\_\_\_\_ (SUBMIT THE SAME NAME EACH TIME)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TRANSPORTERS PHONE NO. REQUIRED \_\_\_\_\_ / \_\_\_\_\_ FAX NO. \_\_\_\_\_ / \_\_\_\_\_

MOVE DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ CONTACT PERSON (FULL NAME) \_\_\_\_\_

(ORIGIN) CITY \_\_\_\_\_ ADDRESS IF WITHIN AZ \_\_\_\_\_

(DESTINATION) \_\_\_\_\_ ADDRESS IF WITHIN AZ \_\_\_\_\_

**(DO NOT USE THE WORD *LEGAL* WHEN DESCRIBING DIMENSIONS/WEIGHTS)**  
**(ALL HOMES ARE TO BE SPECIFICALLY DESCRIBED I.E., HEIGHT, WIDTH, ETC.)**

**MOBILE HOME INFORMATION:**

**(SUBMIT SEPARATE REQUEST FOR EACH LOAD)**

COMPLETE SERIAL NUMBER \_\_\_\_\_

LENGTH OF HOME \_\_\_\_\_ OVERALL LENGTH \_\_\_\_\_

BOX WIDTH \_\_\_\_\_ ft \_\_\_\_\_ in HEIGHT \_\_\_\_\_ ft \_\_\_\_\_ in

MOBILE HOME WEIGHT \_\_\_\_\_ GROSS WEIGHT \_\_\_\_\_

EAVE ON ROADSIDE \_\_\_\_\_ ft. \_\_\_\_\_ in EAVE ON CURBSIDE \_\_\_\_\_ ft \_\_\_\_\_ in

COLUMN \_\_\_\_\_ ft \_\_\_\_\_ in (roadside) \_\_\_\_\_ ft \_\_\_\_\_ in (curbside)

BAY \_\_\_\_\_ ft \_\_\_\_\_ in (roadside) \_\_\_\_\_ ft \_\_\_\_\_ in (curbside)

ANY ADDITIONAL INFORMATION ON HOME \_\_\_\_\_

☐ IF 2<sup>ND</sup> HALF OF DOUBLE WIDE HOME IS A CLASS "A", PLEASE MARK BOX .

**DETAILED ROUTE FROM START TO FINISH:** INCLUDED IN ROUTE SHOULD BE ANY OFF/ON RAMPS, HWY. LANES, CITY/COUNTY ROADS AND DETOURS THAT ARE NECESSARY TO AVOID LOW CLEARANCES. PLEASE DESIGNATE IF CITY/COUNTY ROADS ARE AVENUES, DRIVES, PLACE, STREETS, ETC. (USE A SECOND PAGE IF ADDITIONAL SPACE NEEDED FOR ROUTING)

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Indicate in blank space below, which port of entry you would like the approval to be sent to or if it is to go to the Motor Vehicle Division Goodyear/Central, Tucson, Safford, Sierra Vista, Willcox or Benson office.

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